

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

31344 7590 12/29/2004

RATNERPRESTIA  
 P.O. BOX 1596  
 WILMINGTON, DE 19899

03/29/2005 RMEBRAH1 00000020 09995465

01 FC:2501 700.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 3.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

|                    |                    |
|--------------------|--------------------|
| Ruth Curran        | (Depositor's name) |
| <i>Ruth Curran</i> | (Signature)        |
| March 24, 2005     | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/995,465      | 11/27/2001  | Tsuyoshi Hanamura    | AGA-100US           | 2339             |

TITLE OF INVENTION: BIT STREAM SEPARATING AND MERGING SYSTEM, APPARATUS, METHOD AND COMPUTER PROGRAM PRODUCT

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES          | \$700     | \$300           | \$1000           | 03/29/2005 |

| EXAMINER   | ART UNIT | CLASS-SUBCLASS |
|------------|----------|----------------|
| VO, TUNG T | 2613     | 375-240030     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 RatnerPrestia

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Media Glue Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, JapanPlease check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 1

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Costas S. Krikelis*Date March 24, 2005

Typed or printed name

Costas S. KrikelisRegistration No. 28,028

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

|                      |                   |
|----------------------|-------------------|
| Application Number   | 09/995,465        |
| Filing Date          | November 27, 2001 |
| First Named Inventor | Tsuyoshi Hanamura |
| Art Unit             | 2613              |
| Examiner Name        | Tung T. Vo        |
| Attorney Docket No.  | AGA-100US         |

**ENCLOSURES (Check all that apply)**

- ☒ Fee Transmittal Form  
☒ Fee Attached (Credit Card Payment)  
☐ Amendment/Reply  
☐ After Final  
☐ Affidavits/Declaration(s)  
☐ Extension of Time Request  
☐ Express Abandonment Request  
☐ Information Disclosure Statement  
☐ Certified Copy of Priority Document(s)  
☐ Response to Missing Parts/  
Incomplete Application  
☐ Response to Missing Parts  
under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)  
☐ Licensing-related Papers  
☐ Petition  
☐ Petition to Convert to a  
Provisional Application  
☐ Power of Attorney, Revocation,  
Change of Correspondence  
Address  
☐ Terminal Disclaimer  
☐ Request for Refund  
☐ CD, Number of CD(s) \_\_\_\_\_  
☐ Landscape Table on CD

- ☐ After Allowance Communication  
to TC  
☐ Appeal Communication to Board  
of Appeals and Interferences  
☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply  
Brief)  
☐ Proprietary Information  
☐ Status Letter  
☒ Other Enclosure(s) (please  
identify below): PTOL-85,  
Return Receipt Card

**Remarks:****SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

|              |                    |                  |        |
|--------------|--------------------|------------------|--------|
| Firm Name    | RatnerPrestia      |                  |        |
| Signature    |                    |                  |        |
| Printed Name | Costas S. Krikelis |                  |        |
| Date         | March 24, 2005     | Registration No. | 28,028 |

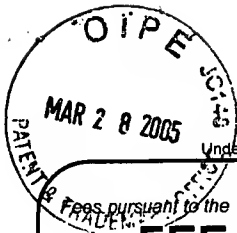
**CERTIFICATE OF TRANSMISSION / MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |             |      |                |
|-----------------------|-------------|------|----------------|
| Signature             |             |      |                |
| Typed or Printed Name | Ruth Curran | Date | March 24, 2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**Complete if Known**

|                      |                   |
|----------------------|-------------------|
| Application Number   | 09/995,465        |
| Filing Date          | November 27, 2001 |
| First Named Inventor | Tsuyoshi Hanamura |
| Examiner Name        | Tung T. Vo        |
| Art Unit             | 2613              |
| Attorney Docket No.  | AGA-100US         |

**TOTAL AMOUNT OF PAYMENT** (\$) 1,003**METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

|   |   |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments                                  |

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES  |              | SEARCH FEES  |              | EXAMINATION FEES |              | Fees Paid (\$) |
|------------------|--------------|--------------|--------------|--------------|------------------|--------------|----------------|
|                  | Small Entity | Small Entity | Small Entity | Small Entity | Small Entity     | Small Entity |                |
|                  | Fee (\$)     | Fee (\$)     | Fee (\$)     | Fee (\$)     | Fee (\$)         | Fee (\$)     |                |
| Utility          | 300          | 150          | 500          | 250          | 200              | 100          | _____          |
| Design           | 200          | 100          | 100          | 50           | 130              | 65           | _____          |
| Plant            | 200          | 100          | 300          | 150          | 160              | 80           | _____          |
| Reissue          | 300          | 150          | 500          | 250          | 600              | 300          | _____          |
| Provisional      | 200          | 100          | 0            | 0            | 0                | 0            | _____          |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Small Entity |          |
|--------------|----------|
| Fee (\$)     | Fee (\$) |
| 50           | 25       |
| 200          | 100      |
| 360          | 180      |

|                     |                     |                 |                      |                                      |
|---------------------|---------------------|-----------------|----------------------|--------------------------------------|
| <b>Total Claims</b> | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b>     |
| _____               | _____               | _____           | _____                | <b>Fee (\$)</b> <b>Fee Paid (\$)</b> |
| - 20 or HP =        | x                   | =               |                      |                                      |

HP = highest number of total claims paid for, if greater than 20

|                      |                     |                 |                      |
|----------------------|---------------------|-----------------|----------------------|
| <b>Indep. Claims</b> | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| _____                | _____               | _____           | _____                |
| - 3 or HP =          | x                   | =               |                      |

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| _____               | _____               | _____   | _____           | _____                |
| - 100 =             | / 50 =              | (round up to a whole number)                            | x               | =                    |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Issue Fee, Publication Fee, Advance Copy**Fees Paid (\$)**1,003**SUBMITTED BY****Complete (if applicable)**

|                   |                            |                                 |        |           |                |
|-------------------|----------------------------|---------------------------------|--------|-----------|----------------|
| Signature         | <u>Costas S. Krikellis</u> | Registration No. Attorney/Agent | 28,028 | Telephone | (302) 778-2500 |
| Name (Print/Type) | Costas S. Krikellis        |                                 |        | Date      | March 24, 2005 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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